

# **PART B - FEE(S) TRANSMITTAL**

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22428 7590 03/17/2008

**FOLEY AND LARDNER LLP**  
**SUITE 500**  
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**WASHINGTON, DC 20007**

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|                    |
|--------------------|
| (Depositor's name) |
| (Signature)        |
| (Date)             |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
|-----------------|-------------|----------------------|---------------------|------------------|

|            |            |              |             |      |
|------------|------------|--------------|-------------|------|
| 10/813,015 | 03/31/2004 | Jed W. Fahey | 032303-0160 | 5262 |
|------------|------------|--------------|-------------|------|

**TITLE OF INVENTION: TREATMENT OF HELICOBACTER WITH ISOTHIOCYANATES**

**042433-0115**

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|-------------|--------------|---------------|---------------------|----------------------|------------------|----------|
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|                |     |       |       |     |        |            |
|----------------|-----|-------|-------|-----|--------|------------|
| nonprovisional | YES | \$720 | \$300 | \$0 | \$1020 | 06/17/2008 |
|----------------|-----|-------|-------|-----|--------|------------|

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|----------|----------|----------------|
|----------|----------|----------------|

|                    |      |            |
|--------------------|------|------------|
| KWON, BRIAN YONG S | 1614 | 514-042000 |
|--------------------|------|------------|

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563)

2. For printing on the patent front page, list

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

**Brassica Foundation for Chemoprotection Research, Inc,**

**Baltimore, MD**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2)

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Authorized Signature

Date

Typed or printed name **Richard C. Peet**

Registration No. **35,792**

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